



BELLAVANCE TRUCKING 2020 EMPLOYEE BENEFITS SUMMARY

Medical • HRA • Dental • Vision • Life • Disability • Retirement

Benefit Election Worksheet

Employee Name: _____

Benefits Elected: _____

Type of Plan	Name of Carrier	Name of Plan	Coverage
Medical	Cigna	<input type="checkbox"/> Cigna Open Access Plus Network	
Dental	N/A	<input type="checkbox"/> In House Reimbursement	
Vision	VSP	<input checked="" type="checkbox"/> VSP Signature Plan	
Voluntary Life Insurance	Renaissance	<input type="checkbox"/> Basic Life Insurance	
Voluntary Short-Term Disability Insurance	Renaissance	<input type="checkbox"/> Weekly Income Insurance	
Voluntary Long-Term Disability	Renaissance	<input type="checkbox"/> Monthly Income Insurance	
Retirement Savings	John Hancock	<input type="checkbox"/> 401(k) Retirement Plan	
Employee Assistance Program	Invest EAP	<input checked="" type="checkbox"/> EAP	
Student Loan Assistance	GradFin	<input checked="" type="checkbox"/> Free Consultation	



Benefit Summary 2020

Bellavance Trucking is proud to offer a comprehensive benefits program to all eligible employees. Your benefits are an important part of your total compensation, so we invite you to familiarize yourself with the details of these plans and encourage you to seek clarification when necessary. We are confident that you will find this benefits package of great value to you and your family.

Eligibility

A regular full-time employee is an employee who has completed his or her introductory period and is regularly scheduled to work 30 or more hours per week. Full-time employees are eligible for benefits on the 1st of the month following 60 days of employment, after a qualified life event, or annually during the open enrollment period.

When coverage begins

You must complete the enrollment process within 30 days of your eligibility date. Coverage is effective on the first day of the month after 60 days of employment. If you fail to enroll on time you will NOT have benefits coverage (except for company-paid benefits.) Changes made during Open Enrollment are effective at the start of the next calendar year.

Employee Benefit Center

More detailed explanations of benefits, enrollment/claim forms, and policy documents can be accessed online by visiting Bellavance's Employee Online Benefit Center at:

<http://bellavance.trgportal.com>

User name: Bellavance Password: benefits

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How to Enroll

To enroll in benefits go to <http://www.benefitsjunction.com>

There you will complete your enrollment for all benefits by electing or waiving coverage.

Medical | Cigna



Key Medical Benefits		Cigna OAPIN	
Preventive Care	Preventive Care Visits	Plan pays 100%, no deductible	
Physician Services	Primary Care Physician Visit Specialist Visit Urgent Care/ER Visit	Deductible, then plan pays 100%	
Deductible	Individual/Family	\$6,900 / \$13,800	
Out-of-pocket Max	Individual/Family	\$6,900 / \$13,800	
Account Funding	Account Type	Health Reimbursement Account First Dollar	Health Reimbursement Account Catastrophic
	Employee Only	\$1,000	\$3,900
	Employee + Spouse	\$2,000	\$7,800
	Employee + Child(ren)	\$2,000	\$7,800
	Family	\$2,000	\$7,800
	Funding Frequency	<i>Annually</i>	<i>Annually</i>
Hospital Services	Inpatient Hospital Outpatient Facility Skilled Nursing Facility MH/SA Inpatient Imaging (CT/PET/MRI) Lab & X-Ray	Deductible, then plan pays 100%	
Prescriptions	Preventive Medicine	Preventive Generic/Preferred Brand: \$0, no deductible	
	Retail (30 day)/ Retail & Mail-Order (90 day)	Generic: \$10/ \$30 Preferred Brand: \$30/ \$90 Non-Preferred Brand: \$60/ \$180	
Employee Weekly Cost			
	Employee	\$68.00	
	Employee + Spouse	\$145.00	
	Employee + Child(ren)	\$120.00	
	Employee + Family	\$175.00	



Telehealth Services | Cigna



NEED TO SEE A DOCTOR?

WE'VE GOT CONNECTIONS.

Amwell and MDLIVE are available through your health benefit plan.



We call it Cigna Telehealth Connection. Now you can get the care you need – including most prescriptions – for a wide range of minor conditions – by connecting with a board-certified doctor via video chat or phone, without leaving your home or office. When, where and how it works best for you!

Choose when:

Day or night, weekdays, weekends and holidays.

Choose where:

Home, work or on the go.

Choose how:

Phone or video chat.

Choose who:

Amwell* or MDLIVE* doctors.

Use Cigna Telehealth Connection to connect with a doctor about:

- > sore throats
- > allergies
- > headaches
- > rashes
- > stomachaches
- > acne
- > fevers
- > UTIs and more
- > colds and flu

Signing up is easy!

- > Set up and create an account with one or both Amwell and MDLIVE
 - > Complete a medical history using their “virtual clipboard”
 - > Download vendor apps to your smartphone/mobile device.*** Visit the website or call to register
- Register for one or both today so you'll be ready to use a telehealth service when and where you need it.

What is the Cost?

The Cost of Service will be provided when the visit is scheduled. The cost is the same or less than a visit with your primary care provider.

Cigna Telehealth Connection

Request a consultation 24/7/365



AmwellforCigna.com
855.667.9722



MDLIVEforCigna.com
888.726.3171

24/7/365 access to U.S.
board-certified doctors

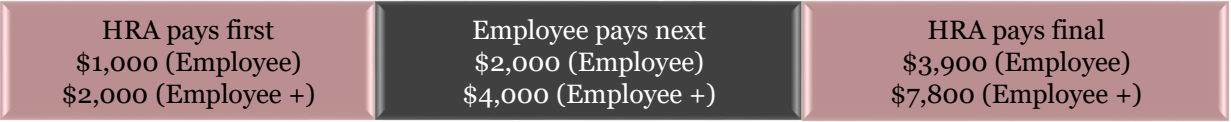
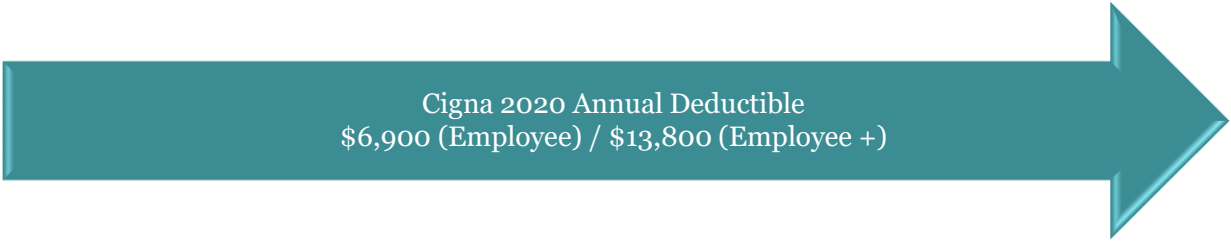


Health Reimbursement Account | Healthy Dollars

Health Reimbursement Account

Can only be used for medical services that are applied towards your medical deductible; you **can't** use the HRA for Rx, dental or vision expenses.

First Dollar	Bellavance Trucking will fund the first \$1,000 of your annual deductible for individuals and \$2,000 for employee plus dependents. This is also known as "HRA first dollar funds."
Employee Pays	If you use all the funds on your card, the employee only enrolled, pays the next \$2,000 in medical and Rx bills, and the employee + dependents enrolled pays the next \$4,000 in medical and Rx bills. This is also known as the "employee bridge."
Catastrophic	Bellavance Trucking will then fund an additional \$3,900 for individuals and \$7,800 for employee plus dependents. This is also known as "catastrophic funds."



Spending Accounts | Healthy Dollars

Flexible Spending Account

Flexible Spending Accounts provide you with an important tax advantage that can help you pay health care and dependent care expenses on a pre-tax basis. By anticipating your family's health care and dependent care costs for the next year and setting aside money, you can actually lower your taxable income.

Annual Max & Utilization:

The annual maximum amount you may contribute to this FSA is \$2,750 per calendar year. This program allows employees to use pre-tax dollars for certain IRS-approved expenses. Up to \$500 of unused FSA dollars can be rolled over to the following calendar year. Any remaining unused funds will be forfeited.

Some examples include:

- Hearing services, including hearing aids and batteries
- Vision services, including contact lenses, contact lens solution and eyeglasses
- Dental services and orthodontia
- Medical and Rx deductibles
- Reimbursable through the FSA unless you have a prescription from your physician.

An FSA is a great way to set aside money to cover the employee portion of the deductible on the medical plan. For more information on Flexible Spending Accounts, visit

<https://www.healthcare.gov/have-job-based-coverage/flexible-spending-accounts/>

Dependent Care Account

The dependent care account allows you to reimburse yourself with pre-tax dollars for daycare expenses for your children under age 13 and other qualified dependents. You can contribute up to \$5,000 per year; \$2,500 if you and your spouse file your taxes separately.

Eligible Day Care Expenses:

- Childcare/Adult Care by a licensed childcare facility for children under age 13 who qualify as dependents on your federal income tax return
- Childcare/Adult Care for children or adult of any age who are physically or mentally unable to care for themselves and who qualify as dependents

Ineligible Day Care Expenses:

- Child support payments
- Food, clothing and entertainment
- Educational supplies and activity fees
- Cleaning and cooking services not provided by the day care provider
- Overnight camp

To qualify for a Dependent Care Account, both spouses need to be employed or full-time students.



Dental | Bellavance In House Reimbursement

Bellavance In-House Dental Reimbursement

Our dental benefit is an “In-House Reimbursement Benefit” and is for employees and their dependents that have no dental coverage.

Preventive Care	Pays \$100.00 maximum per visit. (You are allowed two preventive care visits per year, six months apart.) Coverage Includes: Exams, emergency office visits, cleanings, x-rays, sealants and fluoride.
Basic Care	Pays 80% on fillings, general anesthetics, extractions, oral surgery, root canals and periodontics.
Major Care	Pays 50% on crowns, bridges, and dentures.
Deductible	\$50.00 per person, per calendar year combined deductible for Basic and Major Care. (No deductible on Preventive Care)
Maximum Yearly Benefit	1,000.00 per person, \$3,000.00 per family of three or more.
Limitations	<ul style="list-style-type: none">• There is <u>no</u> orthodontic coverage.• Once a dependent child of an employee reaches their 20th birthday, they are no longer eligible to receive dental benefits.



Your original dental paperwork will be returned back to you with an explanation of what you were reimbursed for each service. Should you have any questions, don't hesitate to call Krissy Bellavance at 802-661-5535.

Vison | VSP



Benefit	Description	Copay	Frequency
WellVision Exam	Focuses on your eyes and overall wellness	\$10	Every calendar year
Prescription Glasses		\$25	See frame and lenses
Frames	\$130 allowance for a wide selection of frames \$150 allowance for featured frame brands 20% savings on the amount over your allowance \$70 Costco frame allowance	Included in Prescription Glasses	Every other calendar year
Lenses	Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children	Included in Prescription Glasses	Every calendar year
Lens Enhancements	Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 35-40% on other lens enhancements	\$50 \$80 - \$90 \$120 - \$160	Every calendar year
Contacts (instead of glasses)	\$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation)	Up to \$60	Every calendar year

Your Coverage with Out-of-Network Providers:

Exam: up to \$50	Frame: up to \$70	Single Vision Lenses up to \$50	Lined Bifocal Lenses up to \$75	Lined Trifocal Lenses up to \$100	Progressive Lenses up to \$75	Contacts up to \$105
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Voluntary Life and Disability | Renaissance

Voluntary Life Insurance

	Employee Life	Spouse Life	Child Life
Benefit Amounts	\$10,000 to \$500,000 in increments of \$10,000. Not to exceed 5x base annual earnings or \$500,000.	\$5,000 to \$500,000 in increments of \$5,000. Not to exceed the lesser of 100% of employee election or \$500,000	<ul style="list-style-type: none"> Age 15 days to 6 months: up to 20% of employee benefit Age 6 months to 24 years: \$2,000 to \$10,000 – not to exceed 100% of employee election
Guaranteed Issue Amounts	<ul style="list-style-type: none"> Under age 70 –\$150,000 Over age 70 –\$10,000 	<ul style="list-style-type: none"> Under age 70 –\$25,000 Over age 70 –\$0 	All benefit amounts
Reduction Schedule	65% at age 70; 50% at age 75	65% at age 70; 50% at age 75	N/A

Voluntary Short Term Disability

Provides financial protection for you by paying a portion of your weekly income while you are disabled..

Elimination Period	Benefits for a payable claim begin the day after 7 consecutive days for disability due to injury or illness.
Weekly Benefit	60% of weekly earnings, rounded to the next higher \$1.00, subject to the minimum benefit of \$25 and the maximum benefit of \$2,000.
Benefit Duration	26 Weeks

Voluntary Long Term Disability

Provides financial protection for you by paying a portion of your monthly income while you are disabled.

Elimination Period	Benefits for a payable claim begin the day after 180 consecutive days from when you became disabled.
Monthly Benefit	60% of monthly earnings subject to the maximum benefit of \$7,500 per month.
Benefit Duration	For a disability which begins before you reach age 60, benefits will be paid until you reach the Social Security Normal Retirement AGE (SSNRA). For a disability which start on or after you reach age 60, the maximum period of payment will be determined according to the table in your plan documents.



Additional Benefit Programs



Employee Assistance Program (EAP)

Life is full of challenges and sometimes balancing it is difficult. Bellavance is proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employee and their families. The EAP is provided at **NO COST** to you through Invest EAP and can help with the following issues, among others:

Stress, anxiety or depression	Marital conflicts
Relationships	Empty-nesting
Problems with your children	Legal issues
Substance abuse	Mental health
Grief and loss	Workplace conflict



Student Loan Assistance

This Student Loan Assistance program is designed to help employees pay back student loan debt and improve their financial well-being. Utilizing Bellavance Trucking's relationship with The Richards Group, consultation services are provided free of charge through GradFin.

GradFin will:

Provide one-on-one education consultations with GradFin Consultation Experts to review your current loan status and discuss personalized payoff options to save on your loans.

Offer a competitive interest rate reduction when you refinance your loans.

Provide up to a \$300 bonus to you when you refinance your loans with GradFin. The \$300 bonus will be applied to the principal balance of the closed loan.



401(k) Retirement Plan

Bellavance Trucking is proud to offer a 401(k) Plan to encourage you to save for your retirement and to also help fund it. Please ask to see our Summary Plan Description for a more detailed listing.

Plan Highlights:

You will receive our maximum match of 2.5% once you contribute at least 4% of your salary. This match vests 20% after two years-of-service and 20% after each additional year. You will become automatically enrolled in the plan on the 1st of the month following 60 days of employment (unless you "opt-out"). We offer pre-tax (traditional) or after-tax (Roth) contribution options to better serve your needs.

Accessing your 401(k) Account

You will receive quarterly statements from John Hancock detailing your activity and you can also sign up to view your account balance/make changes on-line by visiting www.jhancockpensions.com

Contact Information



Please refer to the list below when contacting one of the benefit vendors. For general information contact Human Resources. More detailed explanations of benefits, enrollment/claim forms, and policy documents can be accessed online by visiting the Bellavance's [Employee Benefit Center \(EBC\)](#).

Plan	Administrator	Contact Information
Medical Plan	Cigna	800-244-6224 www.cigna.com
Vision Plan	VSP	877-877-7195 www.vsp.com
HRA Administration	Healthy Dollars	877-900-6979 http://healthydollarsinc.com
Voluntary Life, Short Term and Long Term Disability	Renaissance	844-368-6485 www.renaissancefamily.com
Employee Assistance Program	Invest EAP	800-287-2173 https://www.investeap.org/
Student Loan Assistance	GradFin	610-639-7840 www.gradfin.com/trg.html
401(k) Retirement Plan	John Hancock	800-395-1113 www.jhancockpension.com
Employee Benefit Center	The Richards Group	http://bellavancetrucking.trgportal.com

